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FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 127B4M5

LOUISIANA REFORM PAC

ADDRESS (number and street) P.O. Box 65796

(Check if address is changed) WASHINGTON DC 20035
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS VLLANDSEPOL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER 202-283-1196

2. DATE 02 16 2005

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer MARK Valente III

Signature of Treasurer [Signature] Date 02 16 2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only For further information contact: Federal Election Commission Toll Free 800-424-9600 Local 202-524-1100

FEC FORM 1 (Revised 08/2003)